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BOROUGH OF WORKINGTON

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1956

BY

J. L. HUNTER

M.B., Ch.B., D.P.H.

Medical Officer of Health

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Staff of the Public Health Department

JAMES L. HUNTER, M.B., Ch.B., D.P.H. ...			Medical Officer of Health.
R. E. FLETCHER, M.B., Ch.B. ...			Deputy Medical Officer of Health.
§*RICHARD JAMES	...	...	Chief Public Health Inspector.
§*PATRICK J. ELDON	...	...	Assistant Public Health Inspector.
*CHARLES E. PEARSON	...	...	Assistant Public Health Inspector.
MRS. E. D. BRAYTON	...	...	Chief Clerk.
MISS N. MENHAMS	...	...	Junior Clerk.

* Certificate of R.S.I. and Sanitary Inspectors' Joint Board.

§ Certificate of Meat and Other Foods (R.S.I.).

TOWN HALL,
WORKINGTON,
June, 1957.

TO THE WORSHIPFUL THE MAYOR,
THE ALDERMEN AND COUNCILLORS OF THE
BOROUGH OF WORKINGTON.

Your Worship, Ladies and Gentlemen,

I beg to submit my Annual Report as your Medical Officer of Health for the year 1956. The report is prepared along the lines indicated in the Ministry of Health Circular 19/56.

Apart from the not-unexpected increase in the notification of measles and whooping-cough, both of which diseases ebb and flow in the short period of two to three years, the incidence of infectious disease was slight. The much publicised, and indeed, relatively severe outbreak of poliomyelitis in West Cumberland, struck lightly in Workington: four cases were notified, two mildly paralytic and two non-paralytic. The dysentery group of diseases and food-poisoning were represented by only two notified cases of the former condition as compared to twenty-six in 1955.

A further hopeful advance in the prevention of infectious diseases was made by the introduction of vaccination against Poliomyelitis. The first injections to be given unhappily coincided with the outbreak of poliomyelitis in West Cumberland but the new procedure was held up in Whitehaven only, in which place the disease was most active at the time.

Other procedures, such as diphtheria immunisation and tonsillectomy, were also suspended throughout the area in order to restrict as far as possible local damage to tissues which might predispose or provoke the onset of paralytic disease.

The vital statistics for the year were satisfactory, including a rate lower than for 1955 in respect of Infantile Mortality (1955—35.3: 1956—26.7).

The resident population increased to over twenty-nine thousand (29,070). The total live births were 486 giving an adjusted birth-rate of 16.2 per 1,000 population compared to 15.2 in 1955. Nineteen births were illegitimate. There were thirteen still-births during the year. Deaths at all ages totalled 311 giving a death-rate of 12.7 per 1,000 population (12.4 in

1955). The chief causes of death were diseases of the heart and circulation, cancer, and diseases of the chest. There were four times as many deaths due to accident as there were deaths from Tuberculosis. The two deaths from this latter cause were the smallest number ever recorded in Workington. The number of *notifications* of the disease has not lessened, perhaps because better measures in early detection, prompt and more effective treatment, and active preventive inoculation have not yet materially affected the conditions under which susceptibles acquire infection.

The suspension for a number of summer months of the diphtheria immunisation scheme did not effect a lowering of the *state* of immunisation in the child population as a whole (0—15 years) but the figure fell a little in some of the younger age groups because of fewer primary inoculations.

The number of houses built by the Corporation was 102: by private enterprise 17—a total decrease of 57 on the previous year. The number of houses represented as unfit for human habitation under the Housing Acts was sixty.

Refuse collection and disposal presented no new problems during the year.

It redounds much to the credit of Mr. James, the Chief Public Health Inspector that the work of the department is carried out so thoroughly despite much interruption and the acceptance of fresh duties consequent on new legislation. At the time of writing the department is one short in Public Health Inspectors and advertisement for replacement has produced no application for the post. The question of employing a pupil inspector was investigated a few years ago with no success, but has again been taken up with other local sanitary authorities.

Extended particulars in respect of food premises are given later in this report.

I wish to express my grateful thanks to all the Staff of the Public Health Department for their continued good work during the year and also to the Chairman and Members of the Public Health Committee for much support and encouragement.

I am,
Mr. Mayor, Ladies and Gentlemen,
Your obedient servant.
J. L. HUNTER,
Medical Officer of Health.

SECTION A.

SOCIAL AND STATISTICAL CONDITIONS OF THE AREA

1.—General.

(a) The town is a scene of full employment—in the staple heavy industries of coalmining and steel production, and in lighter engineering, clothing and other employments. The housing conditions of many of the inhabitants of the town give much concern and thought to all concerned in a time of restricted building of new houses and increasing population.

(b) Area in Acres	5,644
Population (Registrar-General's Estimate of Residents—mid-year, 1956)	29,070
Number of inhabited houses according to Rate Books at the end of 1956	8,814
Rateable Value	£303,061
Sum represented by a Penny Rate	£1,179

2.—Vital Statistics.

Births.

<i>Live Births:—</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Legitimate	231	236	467
Illegitimate	10	9	19
Total	241	245	486

Birth Rate per 1,000 Population	16.7
Adjusted Birth Rate	16.2

<i>Still Births:—</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Legitimate	10	6	16
Illegitimate	—	1	1
Total	10	7	17

Rate per 1,000 Live Births	34.9
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Deaths.

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Deaths (all ages)	181	130	311
Crude Death Rate per 1,000 Population ...	10.7		
Adjusted Death Rate	12.7		

Deaths from individual causes:—	
Tuberculosis	2
Cancer	63
Maternity	1
Measles	Nil
Whooping Cough	Nil
Deaths of Infants under 1 year	
(Legitimate, 13; Illegitimate, Nil)	13
Death Rate of Infants under 1 year—	
per 1,000 Live Births	26.7
Infantile Death Rate per 1,000	
Legitimate Live Births	27.0
Infantile Death Rate per 1,000	
Illegitimate Live Births	Nil

3.—Notes and Comparisons on Vital Statistics.

Births.

<i>Live Birth Rate:—</i>	1956	1955
Workington (Crude)	16.7	15.7
Workington (Adjusted)	16.2	15.2
Urban Districts of Cumberland	17.5	16.7
Rural Districts of Cumberland	16.5	16.1
County of Cumberland	16.9	16.4
England and Wales	15.7	15.0

The Birth Rates throughout the above table show an increase on the previous year.

Deaths

The comparative Death Rates were:—

	1956	1955
Workington (Crude)	10.7	11.3
Workington (Adjusted)	12.7	12.4
Urban Districts of Cumberland		
(Crude)	12.3	12.2
Rural Districts of Cumberland		
(Crude)	12.1	12.3
Administrative County of		
Cumberland	12.2	12.2
England and Wales	12.2	11.7

The total number of deaths was 311 (328 in 1955) against an increased population (estimated increase of 130) but an increased comparability factor in the year under discussion has raised the adjusted death-rate from 10.7 to 12.7. This latter figure is the one that is comparable to the figure of

12.2 for England and Wales, i.e. the Workington death-rate is 0.5 higher than the national rate.

The chief causes of death were:—

Diseases of the Heart and Circulation .	167 (54%)
Cancer	63 (20%)
Bronchitis and Pneumonia	15 (5%)
Accidents	8 (2.5%)

Thus, more than half the year's deaths were due to diseases of the heart and circulation and one-fifth were due to cancer. Only 5% were caused by bronchitis and pneumonia: twenty years ago deaths from non-tuberculosis respiratory disease accounted for five times as many deaths.

One death came within the category, "Pregnancy, child-birth, abortion" and was in fact due to self-attempted abortion and not to the normal hazards of child-birth.

Only two deaths were recorded from Tuberculosis giving a very low death rate of 0.06 per 1,000 population. In 1955 the death-rate was 0.14 (England and Wales, 0.15), the lowest rate ever reached in the Borough.

There were thirteen deaths of children under one year of age, three less than for 1955, giving an Infantile Mortality Rate of 26.7 (35.3 in 1955).

The following tables show (a) the age at death of all cases, and (b) the cause of death:—

TABLE 1
The Age at Death of Workington Residents—1956

Age Groups	Under 1 yr.	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—25	25—35	35—45	45—55	55—65	65—75	75 & Over	Total
Males	9		1				2	1	2	1	4	15	36	48	62	181
Females	4	1				1	1	1		3	4	5	14	44	52	130
Total	13	1	1			1	3	2	2	4	8	20	50	92	114	311

TABLE 2
Registrar-General's Table of Deaths.
Workington M.B.—1956.

<i>Cause of Death.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Tuberculosis, respiratory	2	—	2
Syphilitic disease	1	—	1
Cancer, stomach	6	3	9
Cancer, lung	9	1	10
Cancer, breast	—	1	1
Cancer, uterus	—	4	4
Other malignant disease	26	13	39
Diabetes	—	2	2
Vascular disease of nervous system	29	27	56
Coronary disease, angina	34	21	55
Hypertension with heart disease	3	1	4
Other heart disease	20	22	42
Other circulatory disease	4	6	10
Influenza	—	1	1
Pneumonia	8	—	8
Bronchitis	5	2	7
Other respiratory diseases	—	1	1
Ulcer or stomach or duodenum	2	1	3
Gastritis, enteritis and diarrhoea	2	1	3
Nephritis and nephrosis	4	—	4
Hyperplasia of prostate	2	—	2
Pregnancy, childbirth, abortion	—	1	1
Congenital malformations	2	3	5
Other defined and ill-defined diseases ...	15	16	31
Motor vehicle accidents	2	1	3
All other accidents	3	2	5
Suicide	2	—	2
All causes	181	130	311

4.—Infantile Deaths

Thirteen deaths occurred among children aged under 1 year. Twelve of the deaths took place within the neo-natal period, i.e. before the attainment of 1 month of age: indeed, nine died very shortly after birth. The causes of death were prematurity, congenital defect and aspiration pneumonia. Prematurity and congenital defect together present a very hard core of resistance to further improvement in figures of infantile mortality. The rate was 26.7.

The tables below show (a) the figures of infantile mortality in Workington since 1911 in average quinquennial periods to 1955 and in the single years 1955 and 1956, and (b) the distribution by age and cause of the thirteen deaths in 1956.

(a) Average Annual Infantile Mortality.
(i.e. Deaths of Infants under 1 year per 1,000
Registered Live Births).

<i>Period.</i>	<i>Workington M.B.</i>	<i>England and Wales.</i>
1911—1915	135	110
1916—1920	113	90
1921—1925	102	76
1926—1930	76	68
1931—1935	70	62
1936—1940	63	55
1941—1945	52	50
1946—1950	41	36
1951—1955	29	27
1955	35.3	25.5
1956	26.7	23.8

(b) Infantile Deaths shown by Ages and
Cause of Death, 1956.

Causes of Death	Age in Weeks				Age in Months						Total Deaths
	1	1—2	2—3	3—4	1 Month	1—2	2—3	3—6	6—9	9—12	
Prematurity	5	1	—	—	6	—	—	—	—	—	6
Congenital Defect	3	1	—	—	4	1	—	—	—	—	5
Pnuemonia	1	—	1	—	2	—	—	—	—	—	2
	9	2	1	—	12	1	—	—	—	—	13

SECTION B.

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

(a) Staff.

The Public Health Committee and the Staff of the Public Health Department are listed at the beginning of this report.

(b) Laboratory Services.

The examination of specimens of pathological material and of water samples (bacteriological and chemical) are undertaken by the Carlisle Laboratory of the Public Health Laboratory Service under the direction of Dr. D. G. Davies. A number of water samples were also submitted during the year to a Public Analyst outside the county area.

Dr. Davies is also nominated to act as a consultant in Smallpox.

(c) Local Health Authority Services

The Cumberland County Council is the authority responsible for the School and Child Welfare Services, the Ambulance and Sitting-case Car Service, the Home Nursing and Midwifery Services, and the Home Help Services.

In relation to Workington (and the surrounding area) the following clinical sessions are held in Park Lane Clinic, Workington:—

Child Welfare—Tuesdays and Wednesdays at 2 p.m.

Diphtheria Immunisation—Wednesdays at 2 p.m.

School Clinic—daily at 9 a.m. A school doctor is in attendance on Tuesdays.

Midwives' Ante-natal Clinics—these are arranged by the Midwives.

Orthopaedic and After-care Orthopaedic sessions are held periodically, by appointment.

Orthoptic Clinic—on reference by eye specialist and by appointment.

Speech Therapy—by appointment on Mondays.

Vaccination against Tuberculosis is carried out in 13—14 year old schoolchildren on consent of the parents, in schools and clinics periodically. Vaccination against poliomyelitis (started in 1956) is carried out in the Park Lane Clinic by appointment.

Provision for the educational treatment of children suffering from handicapped conditions is made by the local health authority.

(d) National Assistance Acts.

No proceedings were taken during the year in respect of old people living under insanitary conditions. One old person was persuaded to accept institutional care. In these cases the help of the local Assistant Superintendent Nursing

Officer of the County Health Authority is always most welcome.

(e) Services of Regional Hospital Board.

General medical, surgical and obstetrical services are available in Workington Infirmary and other hospitals of the area. Special sessions for children of pre-school and school age in respect of conditions of the Eye, Ear, Nose and Throat are held (by appointment) in two hospitals, and also, by special arrangements, in a clinic of the local health authority.

(f) Port Health.

The Medical Officer of Health is also Port Medical Officer.

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA.

The Chief Public Health Inspector, Mr. R. James, furnishes a report on Sanitary matters in the appendix to this report. The new designation of this official came into being by virtue of the Sanitary Inspectors (Change of Designation) Act, 1956.

The Borough Surveyor and Water Engineer, Mr. Nelson Murray, has given certain facts and figures which are incorporated in the various sub-sections below.

1. Housing.

The number of houses built by the Corporation during the year was 102. In addition 17 were constructed by private builders.

Slum clearance is at present limited to the representation of the odd house. During 1956 60 houses were represented as unfit for human habitation. Better housing conditions were ensured for eight families in which there were cases of tuberculosis.

2. Water

No major works in this undertaking were carried out during the year.

Water samples were taken regularly throughout the year at points before and after treatment of the water by chlorination and the addition of lime salts. The results were

generally satisfactory in the town as a whole, but in one area the supply to a large industrial concern was unsatisfactory because of large amounts of iron and other sediment. The provision of flushing—valves at dead-end points effected a great improvement but perhaps other work may still require to be done.

A fair example of the results of chemical and bacteriological analysis is here reproduced:—

Chemical.

Appearance in a 2 ft. tube	Clear and colourless.
pH.	7.0
	part per million.
Ammoniacal nitrogen	0.016
Albuminoid nitrogen	0.035
Oxygen absorbed from N/80 permanganate in 15 mins. at 27 degrees C.	Unnecessary.
Oxygen absorbed from N/80 permanganate in 4 hours at 27 degrees C.	0.28
Solids dried for 1 hour at 180 degrees C.	48
Hardness—Total	8
—Carbonate	0
—Non-carbonate	8
Chlorine present as chlorides	7.0
Heavy metals—	
Iron	Trace.
Copper, lead and zinc	Not detected.
Opinion: "All results within satisfactory limits."	

Bacteriological.

Probable number of coliform bacilli, MacConkey 2 days, 37 degrees C. ...	0 per 100 ml.
Probable number of faecal coli	0 per 100 ml.
Remarks:—Classification—excellent.	

Samples from the public swimming baths were also satisfactory. The recently installed chlorinating plant is now working satisfactorily after some initial mechanical trouble.

3. Sewerage and Drainage.

No major works were completed or in hand.

4. Refuse, Collection and Disposal.

Collection.

No major change took place in transport, routes or method of collection during the year. For the first time a

Diesel-driven vehicle was acquired, which, though dearer in capital outlay as compared to a petrol driven van, is expected to save the additional cost in longer life and less maintenance.

The issue of standard dustbins continued, this being the fourth year since the inception of the scheme. During the four years (to April, 1957) issues to householders totalled 5,631 bins, this figure including issues according to the planned scheme (4,242), issues to newly built houses (309), and replacements (1,080). Approximately 70% of rated premises are now equipped with standard dustbins. The time is of course approaching when a certain amount of replacement of the first issued will have to take place. It was unfortunate that the primary issue of bins was at a time when galvanising was not being carried out with the result that this set will deteriorate more quickly than the galvanised type, and require earlier replacement.

A total of 10,967 tons (estimated on test weighings) of household refuse was collected during the year, representing 20.6 cwts. per 1,000 population per day. In addition some 6,000 tons of refuse other than household and much spoil from building sites was accepted and disposed of on the tips. The net cost per ton, collection and disposal, was 33/6d., a decrease of 3/8d. per ton on the figure for 1955. Collection is mainly (95%) kerbside.

Paper baling re-started during the year and brought in a steady, but small, income (£600).

Disposal.

One new site at Oldside shore was started during the year under a double disadvantage of high winds and deliberate sabotage of fencing, hut and tip faces. The site is much exposed and more difficult to operate than the old Cloffocks site: the continued interference in all aspects of the work by irresponsible youths was hard to bear and most discouraging to the workmen and officials.

The access road to the northern end of the Harrington tip was virtually completed but requires levelling and taking down in parts. It should be possible to use the north entrance to the tip, however, during 1957, thus effecting a certain amount of economy in running costs.

SECTION D.

1. Inspections of Dwelling-houses during the Year.

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	511
	(b)	Number of inspections made for this purpose	3959
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	Nil
	(b)	Number of inspections made for this purpose	Nil
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	60
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for human habitation	451

2. Remedy of Defects during the Year without Service of Formal Notices :

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or other officers	412
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3. Action under Statutory Powers during the Year :

(a)	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	23
(2)	Number of dwelling-houses which were rendered fit after service of formal notices:	
	(a) By Owners	22
	(b) By Local Authority in default of Owners	1
(b)	Proceedings under Public Health Acts:	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	16
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:	
	(a) By Owners	14
	(b) By Local Authority in default of Owners	2

(c)	Proceedings under Section 11 and 13 of the Housing Act, 1936:	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	57
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	57
(d)	Proceedings under Section 12 of the Housing Act, 1936:	
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	3
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or underground rooms having been rendered fit	Nil

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

The Food Hygiene Regulations came into operation on January 1st, 1956, and are a great advance on the Clean Food Byelaws. The Regulations lay down requirements in respect of (1) the cleanliness of food premises, of apparatus and equipment, (2) the hygiene handling of food, (3) the cleanliness of persons engaged in the handling of food and their clothing, and the action to be taken where they suffer from, or are carriers of, certain infections, (4) the construction of food premises, the repair and maintenance of food premises, stalls, vehicles, etc., and the facilities to be provided, and (5) the temperature at which certain foods that are particularly liable to transmit disease are to be kept in food premises.

During the year nearly 1,800 visits were made by the Public Health Inspectors to premises where food is stored, prepared or sold. Every proprietor was interviewed regarding the new Regulations and details of the various sections were fully explained. Notices were given when alterations, etc., were required. In addition every proprietor was issued with a copy of the Regulations, and specially printed posters (3) regarding smoking, dogs in shops and hand washing were given, free of charge, for display.

Revisits were paid and, generally, it was found that traders were co-operating in every way. Indeed, many had exceeded the requirements of the Regulations, especially in

protecting food from possible contamination. There is, of course, always a section with that “couldn’t care less” attitude, and I would again like to stress the important part housewives and others can play in achieving a clean and wholesome food supply by refusing to patronise shops unless the strictest methods of cleanliness are carried out. Displayed foods should be protected from the sun, dust and flies. Food should be so placed and protected in order to obviate customers touching, breathing, coughing and sneezing over and towards the commodities. Smoking whilst handling food, and the abominable habit of blowing into bags or licking of fingers must cease. Aprons, overalls, counters, knives, cutting boards, hands (and finger nails) must be clean. It is impossible for a depleted Public Health Staff to cover continuously this important matter in all its aspects, but the discriminating, and sometimes critical, housewife should be an effective influence in achieving a clean and wholesome food supply.

The following is a list of food premises in the Borough:—

Licensed Premises, Clubs and Temperance Hotels	90
Cafes, Snack Bars and Canteens	46
Butchers	28
Dairies	31
Grocers (Predominant Business)	64
Fruit and Vegetables (Predominant Business) ...	32
Fish	9
Fried Fish and Chips	31
Tripe	1
Bakers and Confectioners	39
Sweets	49
General (shops selling a variety of goods)	63
Brewers and Soft Drink Manufacturers	5
	<hr/>
	488

Persons manufacturing or selling ice cream, or preparing or manufacturing sausages or potted, pressed, pickled or preserved food must have their premises registered with the Local Authority in accordance with Section 16 of the Food and Drugs Act, 1955. The number of such premises which is registered is 152—

Ice Cream	89
Preserved Food	63

The popularity of ice cream continues to increase. There are 5 manufacturers of ice cream within the Borough, 4 prepared by the "hot mix" method and 1 by the "cold mix" method.

Much of the ice cream sold by the 89 retailers is pre-packed.

During the year an attempt was made to check the manufacture of iced lollipops, a popular commodity made by many shopkeepers. Seventeen samples were submitted for bacteriological examination and all were returned satisfactory. Lollipops should be of a standard of purity at least equal to that of the water supply used in their production.

All milk now retailed in the Borough is bottled and is either tuberculin tested or pasteurised. The number of registered dairies is 20, and there are 28 registered purveyors of milk. The number of farms producing tubercular tested milk is 11.

Six samples of milk supplied to Schools within the Borough were submitted for bacteriological examination and proved satisfactory.

The approximate weight of foodstuffs condemned during the year was 21 cwts., a decrease of about $\frac{1}{2}$ ton as compared with the previous year. Condemned foodstuffs are collected and deposited on the refuse tip at the beginning of each working day to ensure complete coverage with refuse matter.

During the year 235 certificates were issued to various food vendors in respect of the goods condemned by the Public Health Inspectors.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

1. Notifiable Diseases (other than Tuberculosis) and Food Poisoning.

The year was marked by an outbreak of Poliomyelitis in the County with the heaviest incidence in West Cumberland. In the Borough itself there were four cases out of a total of 57 notified within the administrative county.

By number of cases, Whooping Cough and Measles were to the fore—a not unexpected increase after the lean year of 1955. There was also an increase in cases of Chickenpox.

Scarlet Fever.

Six cases were notified occurring over the year among children up to the age of 14 years. The cases were mild.

Measles.

There was a biennial increase to 221 cases (43 in 1955 and 120 in 1954).

Whooping Cough.

This disease also showed an increase over 1955 to 252 cases.

Diphtheria and Diphtheria Immunisation.

No case of Diphtheria was notified during the year.

Diphtheria Immunisation was largely suspended between May and August throughout West Cumberland because of the presence of an outbreak of Poliomyelitis. The number of primary inoculations carried out by general practitioners and the local authority was 408, of which 249 were in children under 5 years of age and 159 in school-children. In addition 407 re-inforcement or booster doses were given to school-children. Despite the hold-up due to suspension of inoculations the number of primary and booster injections was sufficient to maintain, and in some respects slightly advance, the degree of protection in the child population but it should again be emphasised that *all children should receive protection against Diphtheria before or at the age of one year of age.*

The tables below give (a) the percentage number of children inoculated *at some time* in the two broad groups of pre-school and school-age: (b) of the numbers actually inoculated, the percentages of adequately protected (i.e. an inoculation course within the last five years) and partially protected; and (c) the Immunity Index in different groups by age, i.e. the percentage of the total child population in these groups that have had adequate protection.

(a) Diphtheria Immunisation State.

Percentage number of children inoculated at some time, calculated on figures of child population (by local estimate since 1952).

Year	Children aged 0—5 years.	Children aged 5—15 years.
1947	26	64
1948	32	65
1949	37	81
1950	37	82
1951	40	84
1952	39	85
1953	40	91
1954	39	89
1955	39	89
1956	39	93

**(b) Protection Percentages in the Inoculated Group
Itself—Adequate or Partial.**

<i>Year.</i>	<i>Adequate.</i>	<i>Partial.</i>
1953	87	13
1954	67	33
1955	77	23
1956	80	20

**(c) Immunity Index—Percentage of Child Population
Absolutely Protected.**

Year.	AGE GROUPS				
	Under 1 year.	2—4 years.	5—9 years.	10—14 years.	0—15 years.
1953	3 %	49 %	81 %	69 %	64 %
1954	4 %	49 %	71 %	38 %	51 %
1955	3 %	50 %	84 %	49 %	59 %
1956	8 %	48 %	81 %	62 %	61 %

Acute Anterior Poliomyelitis (Infantile Paralysis).

The hot late spring and early summer were marked by the occurrence of an outbreak of poliomyelitis in West Cumberland. Starting at the end of April, with Whitehaven as the likely centre, a total of 52 cases were notified to August. Whitehaven and Ennerdale Rural District bore the brunt of the infection, indeed the incidence rate in that borough was higher proportionately than the incidence in Manchester in which city an epidemic started soon after the one in West Cumberland.

In Workington four cases were notified—two mildly paralytic and two non-paralytic. The exact route of infection

to the local cases is not known but is likely to have been by slow peripheral spread from Whitehaven to Ennerdale Rural District on the north side of that town to Workington. Certainly no direct contact with known cases was established. It should be remembered that silent or latent cases occur in this disease and that a carrier state is also likely and that the link between case and case may be difficult to elucidate. It should also be borne in mind, that although an intestinal means of transmission is perhaps mainly involved and generally accepted, droplet infection, as in many other virus diseases, may play a part. There is a vast amount of literature on this increasingly prevalent disease but much investigation remains to be done in all its aspects and particularly in the sphere of its natural history, that is, in the *source* of infection, the continuing reservoir of the virus, and its transmission. Preventive measures—by artificial immunisation—would indeed appear to have outdistanced the slowly increasing knowledge of the natural history of the virus.

The term “Infantile Paralysis” is now a misnomer— young persons and adults are frequently affected by the disease, although the heaviest incidence is still within the pre-school and early school years. The disease is also much more widespread throughout the world than was formerly thought and it is not limited to temperate zones. Recognisably paralytic manifestations are not so common in communities living under insanitary conditions: here the infection is acquired at an early age producing an early immunity (or infantile death marked down to unspecific causes). On the other hand in populations in which good standards of hygiene and sanitation prevail early immunity is not so solidly acquired and open infection becomes more common in persons of older age.

Only a small proportion of those registered for vaccination against poliomyelitis were inoculated. The number was 13. It is hoped that supplies of the vaccine will increase during 1957 so as to cover a big percentage of the child population.

Smallpox Vaccination.

The small total of 78 persons receiving vaccination against smallpox contained 54 children under 1 year of age and 12 aged 1 year. There were 24 re-vaccinations. Thus only one child in nine is now receiving protection against smallpox.

Other Infectious Diseases.

There were three cases of meningococcal infection, two cases of dysentery, twelve cases of acute primary pneumonia, six of erysipelas and three of puerperal pyrexia. There were 169 cases of chickenpox. One case of malaria was notified, the disease having been contracted abroad.

The table which follows summarises all notification of infectious disease, except tuberculosis, and gives the distribution of cases by age groups.

Notification of Infectious Disease, 1956.

[illegible]

2. Tuberculosis.

(a) Prevention.

Vaccination against tuberculosis is carried out by the local health authority in clinics and schools in children aged 13—14 years. The vaccination of infants and other contacts is undertaken at the Chest Clinics under the Regional Hospital Board. During the year 254 schoolchildren attending Workington schools were given B.C.G. vaccination. Precise figures of those living within the Borough are not known as many children attend secondary schools in the town from other districts.

Early ascertainment of cases was continued by the use of the mobile Mass X-ray apparatus. Of a total of 5,806 examinations by the Mass Radiography Unit from Carlisle, 150 cases were recalled for re-examination (ordinary large films) and of these 9 cases were found to have active tuberculosis. Included in these figures were 1,075 examinations of school children of which 18 cases were recalled for large films, and one proved to be a case of active tuberculosis.

The value of this form of examination lies not only in the discovery of active cases of tuberculosis, but also in bringing to light other diseases of the chest, including tumours, and abnormalities of the heart, which may not yet be giving rise to symptoms. The early discovery of tumours of the lungs is of vital importance in relation to success in treatment.

Housing.

Eight families were rehoused during the year because of poor housing conditions and the presence of a notified case of tuberculosis within the family.

(b) Cases of Tuberculosis.

Thirty-eight new cases were notified during the year: 31 being pulmonary (or respiratory) tuberculosis and 7 being non-pulmonary. A total of 71 cases were notified in 1955, i.e. rather less than double the number of the year under consideration. There was, however, a higher proportion of non-pulmonary cases during 1956. There were only two deaths (both males, aged over 65 years). The death-rate reached a record low figure of 0.06 per 1,000 population as compared to 0.12 for England and Wales. i.e. the local death-rate was half the national rate.

It is not wise to comment too definitely on figures produced by a relatively small population and the lower figure of notifications one year may be balanced by a larger one next. And although notifications have dropped in number, the total number of cases on the register has in fact increased, after allowing for transfers in to and out of the district, and deaths, by 34 cases. However, it gives satisfaction to know that the death-rate shows a definite trend towards decrease over the years.

The tables which follow give (a) the number of deaths in Workington, the death-rate in Workington compared to that of England and Wales, (b) the number of new cases and of deaths during 1956, (c) the numbers treated in hospital and (d) a statement of the condition of the Tuberculosis Register at the end of the year.

Tuberculosis—Workington.
Deaths and Death-Rate.

Years	No of deaths — Workington			Death Rate per 1,000 Pop.	
	Pulmonary	Non-Pulmonary	Total	Workington	England and Wales
1911-1915	27.3	4.8	42.1	1.69	1.41
1916-1920	21.8	13.4	35.2	1.25	1.48
1921-1925	17.4	6.6	24.0	0.88	1.08
1926-1930	18.2	8.2	26.4	1.01	0.94
1931-1935	22.8	8.0	30.8	1.19	0.81
1936-1940	20.0	5.4	25.4	0.92	0.67
1941-1945	19.7	5.9	25.6	0.86	0.66
1946-1950	17.2	1.8	19.0	0.67	0.48
1951-1955	9.0	0.8	9.8	0.34	0.22
1956	2	—	2	0.06	0.12

Workington, 1956
Tuberculosis—Notifications and Deaths.

Age Periods.	Notifications				Deaths.			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	...	...	...	...	...	...	...	...
1—5	...	...	...	...	...	...	...	...
5—10	...	1	...	...	...	...	...	...
10—15	...	1	...	1	...	...	...	...
15—20	2	2	1	1	...	...	...	...
20—25	2	3	...	2	...	...	...	...
25—35	6	2	...	...	...	...	...	...
35—45	3	2	...	1	...	...	...	...
45—55	3	1	...	1	...	...	...	...
55—65	1	...	...	...	...	...	...	...
65 & over	2	...	...	...	2	...	...	...
Total	19	12	1	6	2	...	...	...

Workington, 1956.

Tuberculosis—Sanatorium Treatment.

	In Hos- pital 1st. Jan. 1956.	Admit- ted. 1956	Dis- charged	Died.	In Hos- pital 31st Dec. 1956.
Respiratory Cases					
Adult Males ...	5	8	4	1	8
Adult Females ..	7	5	4	...	8
Children ...	1	...	1	...	...
Non-Respiratory Cases					
Adult Males ...	...	...	...	..	...
Adult Females ...	...	...	..	...	...
Children ...	...	...	...	...	...
Observation Cases					
Adult Males ...	...	1	1	...	...
Adult Females ...	...	1	1	...	...
Children ...	...	..	...	...	..
TOTAL ...	13	15	11	1	16

Tuberculosis Register.

On the 31st December, 1956, the number of cases remaining on the Register was as follows:—

Respiratory Cases.

Male 170
 Female 144

Total 314

Non-Respiratory.

Male 35
 Female 47

Total 82

Total on Register 396

3. Cancer.

Deaths from all forms of Cancer totalled 63—three cases less than in 1955. The distribution of cases by location of the disease and by sex was as follows:—

<i>Location.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Stomach	6	3	9
Lungs	9	1	10
Breast	—	1	1
Uterus	—	4	4
Other Sites	26	13	39
	—	—	—
Total	41	22	63
	—	—	—

The mortality rate per 1,000 Population from all types of Cancer was 2.1, a figure slightly less than in 1955 (then 2.3). The rate for England and Wales in 1956 was 2.1. The range in age at death was—males, 10 to 85 years: females, 33 to 83 years. The average age at death was—males, 67 years: females, 70 years.

Approximately one-tenth of the deaths from Cancer were cases affecting the lungs. This year again the incidence of lung cancer was much higher in males.

APPENDIX

SANITARY INSPECTION OF THE AREA.

Annual Report of Chief Public Health Inspector.

To J. L. Hunter, Esq., M.B., Ch.B., D.P.H.,
Medical Officer of Health.

Sir,

I herewith submit the following statement showing the number and nature of inspections carried out during the year 1956, also the number of notices served and the various items dealt with:—

Caravans	...	...	...	...	...	40
Cinemas, Theatres, Clubs, Hotels	...	...	...	...	...	137
Complaints investigated	...	...	...	...	...	892
Drainage inspections	...	...	...	...	...	231
Dwellinghouses:—						
Public Health Acts	...	...	...	...	...	1026
Housing Acts	...	...	...	...	...	592
Re-inspections	...	...	...	...	...	2341
Dirty and/or Verminous Premises	...	...	...	...	...	123
Factories	...	...	...	...	...	348

Food Premises :—

Butchers	...	...	...	...	...	211
Bakehouses	...	...	...	...	...	187
Fish Frying	...	...	...	...	...	129
Ice Cream	...	...	...	...	...	58
Dairies, Farms	...	...	...	...	...	82
Shops	...	...	...	...	...	1031
Markets, Stalls, Carts	...	...	...	...	...	73
Infectious Diseases	...	...	...	...	...	46
Offensive Trades :—						
Tripe Boiling	...	...	...	...	...	17
Rag and Bone Merchants	...	...	...	...	...	24
Knacker Yard	...	...	...	...	...	57
Rats and Mice	...	...	...	...	...	496
Piggeries, Stables, Poultry	...	...	...	...	...	305
Shops Act, 1950	...	...	...	...	...	104
Smoke Nuisances	...	...	...	...	...	21
Refuse Collection and Disposal	...	...	...	...	...	383
Miscellaneous	...	...	...	...	...	149
Total Inspections	...	...	...	...	...	9103

Notices Served

Informal Notices	...	...	...	...	...	451
Statutory Notices	...	...	...	...	...	39

At the end of the year 49 informal notices remained to be dealt with.

The attention of the Borough Surveyor was called to the following defects :—

Illegal structures	...	...	...	...	...	1
Choked sewers or street gullies	...	...	...	...	...	26
Waste or poor pressure of water, defective stop taps, etc.	...	...	...	...	...	12
Repairs to Corporation property	...	...	...	...	...	4

**Summary of Works carried out as a
Result of Notices Served.**

Drainage :—

Drains relaid	...	...	...	...	...	9
Choked drains cleared	...	...	...	...	...	146
Inspection chambers provided	...	...	...	...	...	3
Gullies renewed	...	...	...	...	...	49
Ventilation pipes renewed	...	...	...	...	...	1

Sanitary Conveniences :—

Flushing cisterns repaired or renewed	...	29
W.C. basins renewed	... ..	18
Cone joints renewed	... ..	7
Additional W.C.s provided	... ..	7
Seats renewed	... ..	5
Doors repaired or renewed	... ..	9
Roofs repaired	... ..	5
Floors renewed	... ..	2
Soilpipes renewed	... ..	3
Light and ventilation improved	... ..	3
Walls repaired	... ..	4
Water pipes repaired	... ..	13
Insufficient water supply	... ..	5
Cleansed or limewashed	... ..	6

Yards and Outbuildings :—

Wash houses repaired	... ..	2
Accumulations removed	... ..	14
Yard Services relaid	... ..	5
Coalhouses repaired	... ..	3
Yards to clean	... ..	10
Yard doors to renew or repair	... ..	9

Exterior of Houses :—

Chimney stacks repaired	... ..	11
Roofs repaired	... ..	79
Spoutings cleansed or renewed	... ..	48
Pointing and rendering	... ..	9

Interior of Houses :—

Chimney flues repaired	... ..	17
Ceilings repaired or renewed	... ..	21
Floors repaired or renewed	... ..	15
Fireplaces or ovens repaired	... ..	19
Doors repaired	... ..	7
Wallplaster renewed	... ..	34
Windows repaired or renewed	... ..	11
Sashcords provided	... ..	34
Wastepipes renewed or repaired	... ..	9
Accumulations removed	... ..	14
Waterpipes renewed	... ..	8
Dampness remedied	... ..	54
Staircases repaired	... ..	6

Miscellaneous :—

Animals removed	...	...	...	...	6
Poultry removed	...	...	...	...	5
Caravans removed	...	...	...	...	37

During the year it has been extremely difficult getting repairs carried out. Many builders are reluctant to carry out jobbing work thereby resulting in too much work being given to others and causing considerable delay in remedying defects. Numerous interviews have taken place with property owners, agents and builders, and our duties would be considerably lightened if certain owners or agents took notice of complaints by their tenants and gave attention to defects. Instead many do nothing until this Department becomes involved. It is the duty of owners to see that their property is well maintained, and not to wait until notices are received from this Department.

Verminous Premises.

Owing to the presence of vermin 95 houses were disinfested by this Department. Bed bugs and fleas continue to decline, but ant infestations have increased.

Fluids and powders used for disinfestation work contain D.D.T. and Pyrethum, and for ant extermination 0.25 per cent. Thallium Sulphate is included.

Houses were treated for the following conditions:—

	<i>Council Houses.</i>	<i>Other Houses.</i>
Bugs	1	1
Fleas	3	—
Cockroaches	8	13
Ants	5	42
Silverfish	1	1
Redmite	2	—
Maggots	1	—
Earwigs	3	—
Woodworm	—	1
Other Conditions	7	6

Prevention of Damage by Pests Act, 1949.

No serious rat or mice infestations have occurred. Special attention has been paid to gardens and piggeries, the latter being the chief source of complaint during the year.

The Corporation's sewers were test baited once during the year, and the refuse tips received weekly attention.

In addition to traps, prebaits used are sausage rusk and bread mash, and poisons used are warfarin, zinc phosphate and red squill.

Four hundred and ninety-six visits were made by the Public Health Inspectors, and the treatment services was carried out by the Department's handyman. The Corporation receive a grant from the Ministry of Agriculture, Fisheries and Food for carrying out duties under this Act.

Factories Act, 1937.

Number in Register	...	...	...	...	265
Inspections made	...	...	...	...	535
Notices served	...	...	...	...	19
Prosecutions	...	...	...	...	Nil
Outworkers	...	...	...	...	2
Classification of defects:—					
Want of cleanliness	...	...	...	...	4
Inadequate ventilation	...	...	...	...	2
Insufficient sanitary conveniences	...	...	...	...	3
Defective sanitary conveniences	...	...	...	...	5
Fire escape Certificates issued	...	...	...	...	5

The following is a classified list of trades carried on in the Borough:—

Aerated Waters	...	...	...	...	3
Paint Making, etc.	...	...	...	...	9
Corn Merchants	...	...	...	...	2
Printing, etc.	...	...	...	...	5
Rayon Manufacture	...	...	...	...	1
Gas Undertaking	...	...	...	...	2
Laundry	...	...	...	...	1
Dyers and Cleaners	...	...	...	...	3
Brewery	...	...	...	...	1
Quarrying	...	...	...	...	2
Weaving	...	...	...	...	3
Ice Cream	...	...	...	...	5
General Dealers	...	...	...	...	4
Building Trades	...	...	...	...	29
Wood Cutting and Working	...	...	...	...	30
Leather Working, Shoe Repairing, etc.	...	...	...	...	20
Monumental Masons	...	...	...	...	2

Collieries	...	...	...	...	...	2
Fur Manufacture	...	...	...	...	...	1
Tailoring, Cutting, etc.	...	...	...	...	...	14
Bakehouses	...	...	...	...	...	30
Food Preserving Premises	...	...	...	...	...	52
Light Engineering including Motor Repairs	...	...	...	...	...	21
Heavy Engineering	...	...	...	...	...	7
Electrical Undertaking	...	...	...	...	...	2
Plumbers, Gasfitters, etc.	...	...	...	...	...	11
Scale Repairing	...	...	...	...	...	2

265

Food Inspection.

A regular inspection is made of all premises where food is stored, prepared or sold. The following foodstuffs were found unfit for human consumption:—

Tinned and Bottled Goods:—

Corned Beef (80 tins).	Soup (31 tins).
Pork (38 tins).	Tomatoes (89 tins).
Tongue (28 tins).	Mixed Vegetable (1 tin).
Steak (58 tins).	Mincemeat (9 tins).
Ham (32 tins).	Fruit Salad (22 tins).
Luncheon Meat (68 tins).	Grapefruit (12 tins).
Veal (1 tin).	Peaches (59 tins).
Steak Puddings (3 tins).	Pears (64 tins).
Chicken (4 tins).	Strawberries (16 tins).
Sausage and Beans (4 tins).	Pineapples (73 tins).
Salmon (9 tins).	Oranges (77 tins).
Pilchards (6 tins).	Grapes (4 tins).
Tuna Fish (4 tins).	Apricots (76 tins).
Crab (3 tins).	Cherries (4 tins).
Shrimps (3 tins).	Creamed Rice (4 tins).
Lobster (2 tins).	Jam (7 tins).
Peas (243 tins).	Jellies (4 jars).
Beans (48 tins).	Milk (142 tins).
Pickles (8 bottles).	

Other Foods:—

Sausages (9½ lbs.).	Butter (28 lbs.).
Fish (2 stones).	Margarine (10 lbs.).
Cheese (36 lbs.).	Puff Pastry (6 lbs.).
Pork Pies (3 lbs.).	Sponge Mixture (6½ lbs.).
Kippers (16 lbs.).	Flour (19 lbs.).

The approximate weight of foodstuffs condemned was 21 cwts.

In all cases Certificates were issued under the Food and Drugs Act to the respective vendors.

(Signed) RICHARD JAMES,
Chief Public Health Inspector.

Town Hall,
Workington.

